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CONFIRMATION NO. 9107

<b>SERIAL NUMBER</b> 10/599,447	<b>FILING or 371(c) DATE</b> 02/09/2007 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1651	<b>ATTORNEY DOCKET NO.</b> Q97449
<b>APPLICANTS</b> Yoshinori Moriyama, Okayama-shi, JAPAN; Seiji Tsuboi, Okayama-shi, JAPAN; Akihiro Masuyama, Sagamihara-shi, JAPAN; Toshiaki Takano, Kawasaki-shi, JAPAN; Teppei Nakamura, Sagamihara-shi, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP05/06243 03/31/2005				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2004-106105 03/31/2004				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/15/2007				
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/KADE ARIANI/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 23
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, N.W. SUITE 800 WASHINGTON, DC 20037 UNITED STATES				
<b>TITLE</b> Agent for Preventing or Suppressing Hepatopathy and Functional Food for Preventing or Suppressing Hepatopathy				
<b>FILING FEE RECEIVED</b> 1540	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	